

Enrollment at a Glance

A Guide to Your Plan Basics

Maricopa County

**Taking advantage of insurance offered at the workplace just makes sense.
It's easy, affordable and guaranteed!**

Group Life Insurance and Accidental Death and Dismemberment Insurance (AD&D)

Your employer provides you with Basic Life Insurance coverage and Accidental Death and Dismemberment Insurance in the amount of 1 times your basic yearly earnings rounded to the next highest increment of \$1,000 not to exceed \$750,000.

Additional Term Life Insurance Coverage Options	
For You	1, 2, 3, 4, or 5 times your basic yearly earnings not to exceed \$1,000,000. Annual earnings are rounded to the next higher multiple of \$1,000 and then multiplied by 1, 2, 3, 4, or 5 as elected by you.
For Your Dependent Spouse	\$10,000 to \$100,000 in \$10,000 increments. Spouse coverage is limited to 100% of the employee's coverage amount.
For Your Dependent Children	\$5,000 to \$20,000 in \$5,000 increments on your children from live birth but less than 26 years.
Your Basic and Additional Life coverage is portable. A complete description of the portability benefit will be provided in the certificate of coverage.	

Employee Additional Life Insurance	
Eligibility	All active employees working 20+ hours per week.
Coverage Available without Health Questions	When you are initially eligible for coverage you can elect up to the maximum guaranteed issue amount of 5 times your basic yearly earnings not to exceed \$750,000 of coverage without having to answer questions relating to your health. If you have current Additional Life coverage: At each annual enrollment or family change status, you can increase your current amount of coverage by one plan increment when the total coverage does not exceed \$750,000 or 5 times your basic yearly earnings without having to answer questions relating to your health.
Proof of Good Health	Proof of good health is required if you are applying for more than the guarantee issue (GI) limit or if your application is submitted more than 31 days after you become eligible.



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Dependent Spouse Additional Life Insurance

If you are covered for Additional Life, you may apply for Dependent Spouse Life coverage.

Coverage Available without Health Questions

The first \$50,000 of coverage is offered without having to answer questions related to your Dependent Spouse's health if elected during this enrollment period

Proof of Good Health

Proof of good health is required if you are applying for more than the \$50,000 guarantee issue (GI) limit or if your application is submitted more than 31 days after you become eligible for Dependent Spouse Additional Life Insurance.

Dependent Children Life Insurance

If you are covered for Additional Life, you may apply for Dependent Children Life coverage.

Coverage Available without Health Questions

When you are initially eligible for coverage, you can elect Dependent Children Life coverage without providing proof of good health on your children.

Proof of Good Health

Proof of good health is required if your application is submitted more than 31 days after you become eligible for Dependent Children Life coverage.

Contact your employer if you have questions about the definition of "child" for your plan.

This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of coverage. All coverage is subject to the terms and conditions of the group policy. To keep coverage in force, premiums are payable up to the date of coverage termination. Insurance products and services are provided by ReliaStar Life Insurance Company, a member of the ING family of companies. Policy form LP00GP.

03/01/12



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Life Insurance Rate Information

The cost is calculated based on the age of the employee and/or spouse as of January 1.

The rates shown are guaranteed through 06/30/2015.

Employee and Spouse Additional Life Insurance Rates		
Employee/Spouse Age	Monthly Cost Per \$1,000 of Coverage	
	Non-Tobacco User	Tobacco User
Under 25	\$0.032	\$0.052
25-29	\$0.038	\$0.056
30-34	\$0.050	\$0.064
35-39	\$0.056	\$0.109
40-44	\$0.074	\$0.155
45-49	\$0.120	\$0.308
50-54	\$0.184	\$0.567
55-59	\$0.312	\$0.578
60-64	\$0.528	\$0.896
65-69	\$0.760	\$1.096
70 +	\$1.408	\$1.800

Dependent Children Life Insurance	
Coverage Levels	Monthly Cost
\$1,000 each child	\$0.10
The amount of coverage elected is for all eligible children for one low payroll deduction.	



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Life Insurance Premium Calculator

Use the table below to calculate monthly premium based on the amount of life insurance you plan to elect. The cost is calculated based on the age of employee and/or spouse as of January 1.

Employee Additional Life Coverage Table

Select the total amount of Employee Additional Life coverage you want and divide by 1,000. Example: For \$100,000 of coverage enter \$100	\$_____ (a)
Enter the rate from the table based on your age	\$_____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$_____

Dependent Spouse Additional Life Coverage Table

Select the total amount of Dependent Spouse Additional Life coverage you want and divide by 1,000. Example: For \$50,000 of coverage enter \$50.	\$_____ (a)
Enter the rate from the table based on the age of spouse	\$_____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$_____

Dependent Children Life Coverage Table

Select the total amount of Dependent Children Additional Life coverage you want and divide by 1,000. Example: For \$10,000 of coverage enter \$10.	\$_____ (a)
Rate from the table	\$_____ .10 (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$_____

Total Premium

Total Monthly Premium (12 per year)	\$_____
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Additional Accidental Death and Dismemberment (AD&D) – Personal Accident Insurance provides additional protection for your loved ones in the event you are killed or severely injured in a covered accident. Additional AD&D – Personal Accident Insurance can help you or your family deal with expenses and financial obligations that arise in the wake of a serious accident.

Employee Additional AD&D – Personal Accident Insurance Coverage Option	
For You	1, 2, 3, 4, or 5 times your basic yearly earnings up to a maximum of \$1,000,000. Annual earnings are rounded to the next higher multiple of \$1,000 and then multiplied by 1, 2, 3, 4, or 5 as elected by you.

Family Additional AD&D – Personal Accident Insurance Coverage Option	
If you are covered for Additional AD&D – Personal Accident Insurance, you may elect Additional AD&D – Personal Accident Insurance coverage on your family.	
For Your Dependent Spouse Only	60% of the Employee's benefit amount.
For Your Dependent Children Only	10% of the Employee's benefit amount on your children age live birth but less than 26 years.
For Your Family	Spouse: 50% of Employee's benefit amount. Children: 5% of Employee's benefit amount on your children age live birth but less than 26 years.

Additional AD&D - Personal Accident Insurance Coverage	
Additional AD&D – Personal Accident Insurance pays benefits for a covered accident resulting in the loss of limbs, sight or life. Other losses may also be covered under your employer's plan. Unless otherwise indicated in the certificate, benefits are paid directly to you or your beneficiary.	
Employee Eligibility	All active employees working 20+ hours per week.
Dependent Eligibility	Contact your employer if you have questions about the definition of "child" for your plan.
Coverage Available without Health Questions	Additional AD&D – Personal Accident Insurance coverage is offered to you without having to answer questions related to your health.



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Additional AD&D – Personal Accident Insurance

Coverage Exclusions *(may vary by state)*

No benefit is paid for loss directly or indirectly caused by any of the following:

- Suicide or intentionally self-inflicted injury, while sane or insane.
- Physical or mental illness.
- Bacterial infection or bacterial poisoning. **Exception:** Infection from a cut or wound caused by an accident.
- Riding in or descending from an aircraft as a pilot or crew member.
- Any armed conflict, whether declared as war or not, involving any country or government.
- Injury suffered while in the military service for any country or government.
- Injury which occurs while committing or attempting to commit a crime.
- Use of any drug, narcotic or hallucinogenic agent:
 - Unless prescribed by a doctor;
 - Which is illegal; or
 - Not taken as directed by a doctor or the manufacturer.
- The insured person's intoxication. Intoxication means an individual's blood alcohol content meets or exceeds the legal presumption of intoxication under the laws of the state where the accident occurred.

Insurance Rate Information

Additional AD&D – Personal Accident Insurance

Rate Chart

Monthly Cost Per \$1,000 of Coverage

Employee Only	\$.020
Employee + Family	\$.035

Rates are guaranteed through 6/30/2015.

This is a summary of benefits only. A complete description of benefits and limitations will be provided in the certificate of coverage. All coverage is subject to the terms and conditions of the group policy. To keep coverage in force, premiums are payable up to the date of coverage termination. Insurance products and services are provided by ReliaStar Life Insurance Company, a member of the ING family of companies. Policy form HP09GP (may vary by state).

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Additional AD&D – Personal Accident Insurance Coverage Premium Calculator

Use the table below to calculate your premium based on the amount of Additional AD&D – Personal Accident Insurance coverage you plan to elect.

Select the total amount of Additional AD&D – Personal Accident Insurance coverage you want and divide by 1,000 <i>Example: For \$100,000 of coverage enter \$100</i>	\$_____ (a)
Enter the rate from the Additional AD&D – Personal Accident Insurance rate table	\$_____ (b)
To calculate monthly premium: Multiply (a) times (b)	Monthly Premium: \$_____



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